UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF PENNSYLVANIA

REGISTRATION FORM AND USER AGREEMENT FOR ATTORNEYS AUTHORIZED TO FILE ELECTRONICALLY IN OTHER DISTRICTS

Instructions: This form should be submitted by attorneys who already file documents electronically in other United States Bankruptcy Courts and do not seek further training to use the Case Management/ Electronic Case Filing System (CM/ECF) in this district.

Applicant Information:	
First/Middle/Last Name:	
•	
State of Registration:	
Firm Name:Address:	
FAX Number:	
E-Mail Address:	
Year Admitted to the Bar of the United Pennsylvania:	States District Court for the Western District of
By submitting this registration form, the undersigned agrees that: 1. The provisions of the Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the Court's Local Rules, Electronic Case Filing Procedures, and Administrative Procedures Manual shall be followed when filing documents electronically.	
3. A registered attorney's system eligib	pility may be restricted or revoked by the Court.
for the United States Bankruptcy Cour I am requesting that the Clerk issue a le electronically for cases and proceeding	ly filed documents and have a valid login and password t in (name district). ogin and password so that I may file documents is in the United States Bankruptcy Court for the Western that I must still comply with the Court's requirements for
Date	Attorney Signature
Please return completed form, along w to:	ith completed Credit Card Blanket Authorization Form,

Clerk's Office, U.S. Bankruptcy Court, Attn: CM/ECF Registration, 5414 US Steel Tower,

600 Grant Street, Pittsburgh, PA 15219